

Janet L. Ekenberg
Senior Law Specialist
Legal Division
Phone: 608/231-7883
Fax: 608/236-7883
E-mail: janet.ekenberg@cunamutual.com



November 1, 2006

Mr. Tim VandeHey
Insurance Examiner Supervisor
Financial Analysis and Examination Bureau
State of Wisconsin
Office of the Commissioner of Insurance
GEF 3, 2nd Floor
125 South Webster Street
Madison, WI 53702

**SUBJECT: MEMBERS Life Insurance Company
Application for Certificate of Authority**

Dear Mr. VandeHey:

On behalf of MEMBERS Life Insurance Company ("MEMBERS Life"), we are seeking approval from the Office of Commissioner of Insurance ("OCI") both to change MEMBERS Life's domicile from Wisconsin to Iowa pursuant to sec. 611.223(2), Wis. Stats., and to become a foreign insurer in the state of Wisconsin under ch. 618, Wis. Stats.

A. Change in Domicile

The following information is being provided to you to assist OCI in its review of MEMBERS Life's request for redomestication to Iowa from Wisconsin. This information corresponds to what we understand that OCI wishes to consider in its review of this request. Please let us know if you require additional information.

1. A discussion of MEMBERS Life's business purposes for redomesticating. That is, what advantages does MEMBERS Life see to an Iowa domicile that are or may be relevant to the company's future business plans?

We incorporate by reference Item A2. of the CUNA Mutual submission dated October 13, 2006. Because CUNA Mutual is the ultimate controlling parent of MEMBERS Life, for the sake of administrative ease and efficiency it is desirable to have the subsidiary be domiciled where the parent is domiciled.

2. General comparison of Iowa and Wisconsin insurance law.

See the attached comparison chart. Note that it generally discusses the laws with respect to both life and property/casualty insurers.

3. Discussion of why MEMBERS Life desires the redomestication to occur by February 1, 2007.

We incorporate by reference Item A4. of the CUNA Mutual submission dated October 13, 2006.

4. A copy of MEMBERS Life's current nondomestic license in the intended state of domicile, Iowa, is enclosed.

5. A copy of a letter from the Iowa Deputy Commissioner of Insurance indicating that the Iowa Insurance Division has no objection to the change of domicile is enclosed.

6. Description of the business plan.

Please see the Plan of Operation included with the request for admission as a foreign insurer (item B of this letter).

7. Indication of any permitted practice decisions that may need to be reissued by the intended state of domicile.

MEMBERS Life does not have any permitted practices.

8. Indication of any change in officers, directors, or in the reinsurance program.

No such changes are to be made as part of the redomestication.

9. Amended articles of incorporation.

We are in the process of drafting the revised MEMBERS Life articles. They will be submitted to OCI at a later date.

B. Application for Certificate of Authority

The following information is being provided to assist OCI in its review of MEMBERS Life's request for a Certificate of Authority as a foreign insurer.

- MEMBERS Life is making no changes to its currently authorized lines of business.
- MEMBERS Life's Principal Office will become 2000 Heritage Way, Waverly, Iowa 50677.
- MEMBERS Life is presently working with the Wisconsin and Iowa Insurance Departments to change its state of domicile from Wisconsin to Iowa. This application is part of the process.
- Contact Person is Janet Ekenberg, c/o CUNA Mutual Group (5910 4 C2), 5910 Mineral Point Road, Madison, Wisconsin 53705; E-mail address is janet.ekenberg@cunamutual.com; telephone: 608-231-7883; fax 608-236-7883.

In support of MEMBERS Life's request for admission as a foreign insurer, please find enclosed a completed Expansion Application, which contains information and completed documents related to the following items:

1. Expansion Application Form and Supporting Documents
2. Filing Fee
3. Minimum Paid-in Capital and Surplus Requirements
4. Certificate of Deposit for Statutory Deposit Requirements

4. Certificate of Deposit for Statutory Deposit Requirements
5. Name Approval
6. Plan of Operation
7. Holding Company Form "B" Registration Statement
8. Certificate of Compliance
9. Report of Examination
10. Statutory Memberships
11. Public Records Package
12. NAIC Biographical Affidavits
13. Uniform Consent to Service of Process
14. State-Specific Information

Thank you for your time and consideration. Please give me a call if you have any questions or need additional information.

Sincerely,



Janet L. Ekenberg
Senior Law Specialist
Legal Division

7883/01-75061/5910 4 C2

enclosures

J:\gvr\CORP\Shared\UCAAMLIC-WI-Redomicile\2006 1101 wi MLIC coverletter.doc